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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/527,683 03/11/2005 Tsuyoshi Takahashi 267417US26PCT 73.09 APPLN-TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 08/14/2006 EXAMINER ART UNIT CLASS-SUBCLASS ESTRADA, MICHELLE 2823 438-003000 Change of correspondence address or indication of "Fee Address" (37 CR 1.36.7) Change of correspondence address or indication of "Fee Address" (37 CR) Address from PTO-SB4/22) sittached. Use of a Customer Number is required. The Address indication of "Fee Address" indication form PTO-SB4/22) sittached. Use of a Customer Number is required. Application of the December of Customer Substitute for Hills and the names of up to 3 registered patent attorneys or agents of address from the patent in the paten	CT	JSTOMER 1	NUMBER		C	I hereby certify that t States Postal Service addressed to the Ma transmitted to the USI	with sufficient postage fo il Stop ISSUE FEE add PTO (571) 273-2885, on	reing deposited with the United r first class mail in an envelope ress above, or being facsimile the date indicated below.
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2. For printing on the patent front page, list Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo LECTRON LIMITED Tokyo JAPAN	EXAM	IINER	ART UN	IT	CI	ASS-SUBCLASS	7	
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